

## ALTERNATIVE CARE CLIENT FORM (SS-61)

### PURPOSE

The purpose of this form is to open clients in the Children's Division Alternative Care Tracking System (ACTS); to maintain current data regarding the alternative care client; to record information for the federal Adoption and Foster Care Reporting System (AFCARS); and to serve as the authorization for maintenance payment and Title XIX coverage for children in alternative care and for children approved for adoption subsidy.

NOTE: Special expenses for children in alternative care are authorized and invoiced on the Children's Services Integrated Payment System Invoice Form (CSIPS) (CS-65).

Clients who are to be entered into the Alternative Care Tracking System via the SS-61 are one of the following:

Children placed in the care and custody of CD (includes temporary custody) and placed in Alternative Care.

Children placed in the legal custody of relatives with CD court ordered supervision.

Children placed in the physical custody of relatives with CD retaining legal custody.

Children placed in the legal custody of non-relatives/kinship with CD court ordered supervision.

Children placed in the physical custody of non-relatives/kinship with CD retaining legal custody.

Children previously in the custody of CD who have been placed in the temporary custody of adoptive parents.

Children adjudicated as HDN who are in the care and custody of the Juvenile Court in Class I counties and eligible to receive foster care payment.

Children involved in an interstate placement (ICPC) including those in the custody of another agency.

Children involved with the Interstate Compact for Adoption and Medicaid Assistance (ICAMA). These are children receiving subsidy from another state. These cases are opened and updated by Central Office only. They have a case manager county number of 990. They are opened for Missouri Medicaid only in the ACTS system.

Children designated as status offenders and placed in the care and custody of CD (includes temporary custody).

Children who receive adoption subsidy (the case will remain open as long as the adoption subsidy is in effect). This includes Adoption Subsidy IV-E children from other states whose adoption is finalized but who are opened in ACTS for Title XIX only.

Children placed in a non-licensed alternative care home (includes relative or non-relative kinship), facility or non-approved adoptive home with court ordered legal custody and/or supervision by CD.

Children who are currently or were previously in the custody of a private adoption agency, Division of Youth Services (DYS), or the Department of Mental Health (DMH) who have been approved for adoption subsidy (i.e., the adoption subsidy agreement has been signed by the Director).

Children in the custody of a CYAC parent who is in the Division's custody. The CYAC child must be in the same placement as the CYAC parent. These children are identified as CYAC children throughout the SS-61 Instructions and only certain fields must be completed.

Children who remain in the legal custody of their parent/legal guardian but who are being served through a Voluntary Placement Agreement.

Clients who are **NOT** to be entered into the ACTS tracking system via opening the SS-61 are:

- Children who have been placed in the Division's care and custody but are removed from one parent and placed with another parent.
- Children who are in the custody of the Division but remain placed in the parental home.

#### NUMBER OF COPIES AND DISTRIBUTION:

The initial SS-61 is a one-part form. It is to be transmitted for on-line entry to the data entry operator in the county office or to the Program Development and Support Unit (CPAY) in Central Office for Class I Juvenile Courts. A copy may be made for the file, if needed. In some counties the child's worker may be responsible for entry of information.

The data entry operator will return the original SS-61 to the worker when corrections need to be made. The data entry operator will circle errors in red. The worker should make corrections immediately and return the form to the data entry operator for entry. A one-part turnaround form will be generated, as a result of information entered, to the worker whose service worker number is indicated in Field 105. The turnaround form will have the service worker's name printed in the upper right-hand corner. The eligibility specialist's name will also be printed in the right-hand corner. The worker may make a copy of the turnaround for the file, if needed.

This form is to be completed by the case manager for children who reside in the case manager county or by the service county worker for children who reside outside the case manager county. However, in the latter situation, the service county worker will not complete the form as case manager, but as service worker. For private agency, DYS or DMH adoption subsidy children, the CD county in which the child is placed is responsible for completing and updating the SS-61 form.

NOTE: A turnaround form will also be generated to the service worker when the Eligibility Specialist updates fund category, IV-E eligibility determination date, eligibility code, reimbursable code, Title XIX begin date, Medicaid source code or eligibility specialist number through the ZCES screen.

## INSTRUCTIONS FOR COMPLETION:

The SS-61 form is to be completed at the time a client enters alternative care and as changes occur in the client's situation. It will always be completed for openings, re-openings, changes and closings. All dates (except birth date) must be six digits (e.g., 05-01-89) and cannot be a date in the future.

Information is to be printed in the gray area on the turnaround form. Print legibly when completing the form so the data entry operator can easily read the information to be entered. A turnaround form will be generated to the county as a result of the information entered. Information on the turnaround will be printed in the white areas of the form. If more than one action occurs for a case per day, only one turnaround form will be generated.

The turnaround copy should always be used for re-openings, updating and closing. However, if a change is to be reported before the turnaround is received in the county office, the change can be reported by completing a blank SS-61 form and entering in the required Fields 1 (Action), 2 (DCN), and the changes to be reported.

When the only change to be reported on the form is in Section A - Department Client Information, the worker should re-enter the case manager number (Field 103) in order to generate a turnaround form. This is necessary because Section A of the form only contains department information which is in a shared area of the database and will not generate a turnaround.

If incorrect dates or codes are entered on the form and into the automated system and cannot be corrected on-line, your circuit payment specialist or CSPU should be contacted via IOC, telephone or E-Mail for assistance in making the correction.

To generate a replacement turnaround form, the worker should submit the case file copy of the SS-61 form to the data entry operator, or CPAY for Class I Juvenile Courts, with the case manager number entered in Field 103.

Fields 1-24, 40-48, 56-57, 103 and 105 must be completed for a CYAC child when opening a CYAC child in ACTS. For completion of fields 54 and 55, refer to the specific fields in these instructions. Fields 16, 21, 22, 24, 43, 44, 45 and 102 have specific codes which must be entered for a CYAC child. These are noted in the field instructions and on the code sheet.

Fields 7a, 47a-c, and 61-99 are required for the federal AFCARS reporting system.

NOTE: An asterisk (\*) next to an item indicates that codes for the item are listed on the SS-61 Code Sheet.

\* 1. Action: Enter the code for the action being taken with the case.

NOTE: Refer to Attachment A for required, optional, and not allowed items for each action code.

A - Open - To be used to enter a client into the Alternative Care Client Subsystem.

- |              |  |
|--------------|--|
| B - Reopen - | To be used when the case was previously opened in the Alternative Care Client Subsystem and is now being reopened. |
| C - Update - | To be used to input new or corrected information into the Alternative Care Client Subsystem.                       |
| D - Close -  | To be used to close a case from the Alternative Care Client Subsystem.   |

NOTE: It is important that timely updating of cases occurs as:

- Late updating could cause an overpayment to a vendor;
- Late updating may cause inaccurate descriptive information about a child's status.
- Late updating of AFCARS required data could result in loss of title IV-E federal funds.

C/D - Update/  
Close

When reporting update information (e.g., placement information, court information, TPR information, etc.) prior to closing, a dual action code of C/D can be used, so both update and close information can be updated on the same form.

2. DCN: Enter the Departmental Client Number (DCN) of the client. This is an eight-digit number (e.g., 99999999).

NOTE: The county data entry operator will assign the DCN. The person who assigns the number will enter the DCN in this field.

#### SECTION A - DEPARTMENT CLIENT INFORMATION:

- 3-6. Client Name: Enter in these spaces the client's complete name -- last name, first name, middle initial and suffix (e.g., Jr.). The use of Baby B. or Baby G. plus the last name for an infant is permissible, but not encouraged. When making a name change, only the part of the name being changed must be re-entered in the gray area.

NOTE: To delete the suffix in Field 6, enter an asterisk (\*) in this field.

- \* 7. Race: Enter the race code of the client.

Note: Do not use "unable to determine" unless the child is very young or is severely disabled and no person is available to determine the child's race.

If the child's heritage contains 2 or more races, report all of them. Enter race(s) with which the child or parent (s) identify. For federal reporting purposes, Hispanic is considered to be an ethnicity or origin. Report both the race and ethnicity of the child.

- \*7a. . Hispanic Origin: Enter a code to indicate if the child is of Hispanic origin (regardless of race.) A child is considered to be of Hispanic origin if he is a Mexican, Puerto Rican, Cuban, Central or South American person, or person of other Spanish cultural origin regardless of race.

Note: Field 7 must be coded 1, 2, 4, 5, or U before field 7a can be entered.

Do not use "unable to determine" unless the child is very young or is severely disabled and no person is available to determine whether or not the child is Hispanic.

- \* 8. Sex: Enter the code to denote the sex of the client.
9. Date of Birth: Enter the date of birth of the client. This date must contain eight numbers, e.g., 09-05-1977.

NOTE: A one time reminder notice will be generated 60 days prior to a client reaching 18 years of age and 60 days prior to a client reaching 21 years of age. The reminder notice for clients reaching age 18 is generated to determine if the child should continue to be an alternative care or adoption subsidy client.

10. Social Security Number: Enter the Social Security Number (SSN) of the child. A SSN must be obtained within six months if the child does not have one. Also refer to the Alternative Care Handbook, D-5.

#### SECTION B - GENERAL CLIENT INFORMATION:

11. Case Manager County: Enter the Federal Information Processing Standard (FIPS) code for the county which has legal jurisdiction of the child.

For children placed in Missouri through ICPC, enter the service county code (county of placement) for case manager county. For children placed out of Missouri through ICPC, enter the case manager county code.

Class I County Juvenile Courts should use their assigned juvenile court code indicated in the county code column on the SS-61 Code Sheet.

In the event of an adoptive placement, the county where the child has been physically placed for adoption becomes the case manager county. The SS-61 should be updated at the time the child is physically placed in another county.

For those children determined eligible for adoption subsidy through a private adoption agency, enter the private agency code from the SS-60 Code Sheet of the private agency which has custody or previously had custody of the child.

For children determined eligible for adoption subsidy through DMH, enter Code 995.

For children determined eligible for adoption subsidy through DYS, enter Code 996.

For children eligible for ACAMA the code 990 is entered.

For a CYAC child, enter the same code that is entered for the parent.

- 11a. Case Manager County Begin Date: Upon case opening, this field automatically populates the correct date. For updates, whenever field 11 (Case manager County) is changed or updated, the date the case manager county changed must be updated in field 11a. See memo CS03-48 for special instructions for contracted cases which are placed out of county.
- \*12. Service County: Enter the FIPS Code for the county in which the child is placed. If the child is placed in the case manager county, enter the case manager county code. If the child is placed out of Missouri through ICPC, enter the case manager county code. Class I Juvenile Courts should enter the code for the county in which the child is placed. For a DYS or DMH adoption subsidy child, enter the code for the county in which the child is placed. For a CYAC child, enter the same code that is entered for the parent. For cases being managed by a contracted provider, enter the 600 Series Service County Code from the SS-61 code sheet.
- 12a. Service County Begin Date: Upon case opening, this field automatically populates the correct date. For updates, whenever field 12 (Service County) is changed or updated, the date the service county changed must be updated in field 12.
13. Residence County: Enter the FIPS Code for the county in which the child physically resides. If the child is placed out of Missouri, enter 999 as the residence county code. For Class I Juvenile Court children enter the code for the county in which the child resides. For adoption subsidy children, enter the code for the county in which the child resides. For those children who are in the custody of their adoptive parents, who enter residential care, enter the code for the county where the residential facility is located. For a CYAC child, enter the code for the county in which the CYAC child resides.
14. School District: Enter the number of the school district code in which the client is living. This is a six digit code. If the client is living out-of-state, enter 999-999. Enter the school district number for all children ages 5 through 17. Update the form by entering a school district code when a child becomes 5 years of age. This field must be updated each time the child changes school districts.

NOTE: To delete this code when a child reaches age 18, enter an asterisk (\*) in this field. This information is no longer required when a child reaches age 18.

15. Public School: Enter the code to indicate whether or not the client is attending a public elementary or secondary school. Enter "Y" for Yes or "N" for No. Enter "N" if the child is not attending public school (e.g., preschooler or child who attends parochial or private school).

NOTE: This field must be completed for all children even if the school district (field 14) is left blank.

- \*16. Permanency Goal: Enter a code to indicate the permanency plan established for the child.

01 - Return child to parent(s)/caretaker(s)

To be used when the case plan is to return the child to his/her parent(s).

02 - Adoption/TPR Completed

To be used when adoption is the goal and all parental rights have been terminated.

03 - Adoption/TPR Not Completed

To be used when adoption is the goal but termination of parental rights for all parties has not been completed.

05 - CYAC Child

To be used for a CYAC child.

06 - Another Planned Permanent Living Arrangement

APPLA is the least preferred permanency option. Select this option when there is a **specific permanent placement** for the child, not just a foster care placement that can be indefinitely extended. Choosing this option is appropriate when it is documented for the court that compelling reasons exist which make all other permanency options unacceptable and not in the best interests of the child. See CWM Section 4 Chapter 9.4.5, Another Planned Permanent Living Arrangement (APPLA); CWM Section 4 Chapter 23.2, Case Study Examples of APPLAS; and CWM Section 4 Chapter 23.3, Criteria for Selection of APPLA as a permanency option.

07 - Guardianship

To be used if the case plan is to transfer custody to a non-parent caretaker, with whom the child was not living prior to entering foster care, and whom the court has designated as legal guardian.

08 - Placement With Fit and Willing Relative

To be used if the goal is to have the child live permanently with a non-parent relative or relatives. Choosing this option is appropriate when it is documented for the court that compelling reasons exist which make all other permanency options unacceptable. **Relative placement does not prevent adoption or guardianship.** If the child is with a relative who wishes to care for the child long-term, adoption and guardianship *should still be explored* as they offer more permanence than simple placement through the court. Additionally, a relative placement need not take precedence over a stable placement with another individual who may

wish to adopt or become the child's guardian. See CWM Section 4.9.4.4, Placement with a Fit and Willing Relative.

09 - Case Plan Goal Not Yet Established

To be used when the case plan goal has not yet been established. This goal is not appropriate for more than 30 days.

17-19. Leave these fields blank.

\* 20. Religious Preference: Enter the code for the religious preference of the client.

\* 20a. FST Type: This field is used to identify the type of FST which has occurred on the date entered in field 20b. Enter the code which best matches the **primary** reason for the FST. Although there may be more than one reason for calling an FST, only one FST type may be chosen. Descriptions of each FST type codes are as follows:

- A - 24 Hour Meeting  
Use this code when the FST meeting occurs prior to or within 24 hours of the protective custody hearing.
- B - 72 Hour Meeting  
Use this code for FST meetings held within 72 hours of a child coming into CD custody.
- C - 30 Day Meeting  
Use this code for FST meetings held within 30 days of a child coming into CD custody.
- D - 60 Day Meeting  
Use this code for FST meetings held within 60 days of a child coming into CD custody.
- E - 90 Day Meeting  
Use this code for FST meetings held within 90 days of a child coming into CD custody.
- F - Subsequent 6 Month Meeting  
Use this code for FST meetings held within 6 months of a child coming into CD custody.



- G - Placement Change  
Use this code if the primary reason for the FST meeting is not a 24 hour, 72 hour, 30 day, 60, day, 90 day, or 6 month FST meeting and is convened to discuss a placement change.
- H - Review Progress  
Use this code if the FST meeting is not a 24 hour, 72 hour, 30 day, 60, day, 90 day, or 6 month FST meeting and the **primary** reason for the FST meeting is to review progress.
- I - Goal Change Needed  
Use this code if the FST meeting is not a 24 hour, 72 hour, 30 day, 60, day, 90 day, or 6 month FST meeting and the **primary** reason for the FST meeting is to discuss a change in permanency goal.
- J - Revise Service Plan  
Use this code if the FST meeting is not a 24 hour, 72 hour, 30 day, 60, day, 90 day, or 6 month FST meeting and the **primary** reason for the FST meeting is to revise the service plan.
- K – Meeting at Request of Parent  
Use this code if the FST meeting is not a 24 hour, 72 hour, 30 day, 60, day, 90 day, or 6 month FST meeting and the **primary** reason for the FST meeting is to discuss a placement change.
- L – 60 Month TANF Limit  
Use this code if the FST meeting is not a 24 hour, 72 hour, 30 day, 60, day, 90 day, or 6 month FST meeting and the **primary** reason for the FST meeting is to discuss a family meeting their 60 month TANF time limit.
- M – Other  
Use this code when the primary reason for the FST meeting does not meet the criteria established in above codes A through L.

20b. FST Date: Enter the date of the last FST meeting.

\* 21. Preventive Services: Enter the code to indicate if preventive services were provided to the family prior to the child entering alternative care. Preventive services are services provided to prevent placement in alternative care.

NOTE: This field must be completed for all children in the custody of CD. For a CYAC child, the preventive services code "M" (CYAC child) must be entered.

### HEARING INFORMATION (Court Action):

Fields 22, 23 and 24 are a block. If an entry is made in one of these fields, then all fields in this block must be completed in the gray area even though the information remains the same in the other two fields.

NOTE: Fields 22 and 23 would also be used for reporting a court action (e.g., new court order or an amendment of an existing court order).

- \* 22. Hearing Type: Enter the code for the court hearing court action which has occurred on behalf of the client. If more than one of the court hearings or actions occurs in one day, enter the last court action.

When a hearing action is being reported which does not specifically fall into the category of a protective custody or detention hearing (code 1) or an adjudication hearing (code 2) e.g., case review, it must be reported as a permanency hearing (code 3). For a CYAC child (legal status 7), the hearing type code 4 (CYAC child) must be entered. For a child not in CD custody and in a Voluntary Placement Agreement, use code 7 (the date of placement per VPAP even though there is no court hearing).

23. Hearing Date: Enter the date a court hearing or court action occurred. The same date can be reported twice; however, the Hearing Type and Legal Status information reported with this date will replace the information previously reported if it is different.

NOTE: For openings, the date custody is awarded to CD should be the first hearing date reported into the system for children in legal status 1. For a CYAC child (legal status 7), the hearing date will be the date of placement. For a VPA child (legal status V), the hearing date will be the date the child was placed per the Voluntary Placement Agreement, not (necessarily) the date the VPA was signed.

- \* 24. Legal Status: Enter the appropriate code for the legal status of the client. For a CYAC child, only legal status 7 (CYAC child) can be reported. Descriptions of each legal status are as follows:

**Legal Status 1-** Care and custody with CD with placement in out-of-home care.

Note\*- Children can be in the custody of the Division while remaining in the home. ***An SS-61 should not be opened in this situation, the legal status should be noted on the SS-63.*** Also, removal from one parent and placement with another parent should not be denoted here (don't open or reopen an SS-61).

**Legal Status 2-** Temporary custody with adoptive parents. Placement type must be an adoptive placement type (adf, adr or ado)

**Legal Status 3-** Supervision only with CD. Placement must be out of the home. Physical custody must be placed with another, usually a relative. No maintenance or XIX.

**Legal Status 4-** Care and custody with juvenile court or other agency. Generally this is with DYS, DMH, or is an ICPC case where other state has custody and child resides in our state.

**Legal Status 5-** Finalized Adoption. Placement type must be ADF, ADR, or ADO.

**Legal Status 7-** Child of a youth in out-of-home care. We do not have custody of these children, they remain in the custody of the parent.

**Legal Status 8-** Chafee Youth. Youth age 18 to 21 receiving services through Chafee grant. Youth must have been in CD custody and in LS1 in out-of-home care on date of 18<sup>th</sup> birthday to qualify.

**Legal Status 9-** Subsidized guardianship awarded.

**Legal Status V-** Voluntary Placement Agreement. This legal status is used when the parent/guardian and the CD enter into and sign a Voluntary Placement Agreement.

#### PPRT INFORMATION:

Fields 25 and 26 are a block. When one field is completed, information must be entered in the other field. PPRT information is not entered for a CYAC child.

- \*25. PPRT Action: Enter the code to indicate action taken at the permanency review.

Based upon policy, the system requires a PPRT action to be reported within the first 30 days from date of entry or re-entry into Alternative Care and every six (6) months thereafter for each alternative care client in Legal Status 1.

NOTE: If an incorrect PPRT Action Code (with a correct date) was entered, re-enter the correct code and date. If both an incorrect code and date were entered, contact CPAY to correct.

PPRT reminder notices will be generated 60 days and 30 days prior to the due date. If PPRT information is not reported on schedule, an overdue notice will be generated.

26. PPRT Date: Enter the date the permanency review was completed. Per policy permanency planning review team (PPRT) meetings are to occur within the first 30 days of a child's entry into care and no less than every 6 months thereafter. A date for a PPRT meeting can **only** be entered if during the course of the meeting the following criteria were met:

- An objective 3<sup>rd</sup> party reviewer who is not responsible for case management or delivery of services to the subject child or his/her parents was involved in the PPRT meeting;
- The continuing necessity for and appropriateness of the placement was reviewed;
- The extent of compliance with the case plan was reviewed;
- The extent of progress made toward alleviating or mitigating the causes necessitating placement in foster care was reviewed;
- An expected date for return of the child to his/her own home or another permanent placement is projected;

27. Court Report Date: Enter the date of the most recent 6 month court report. A date previously reported into the system cannot be reported again.

NOTE: If the court report date is not entered on a timely basis (e.g., six months from last report), an overdue notice will be generated to the worker.

27a. Pre-ILP Referral Date: For children ages 14-15 enter the date the child was referred to pre-ILP classes (formerly known as CHOICES).

27b. Pre-ILP Begin Date: For children ages 14-15 enter the date the child begins pre-ILP classes (formerly known as CHOICES).

27c. Leave blank

27d. ILP Referral Date: For youth ages 16-21 enter the date the child was referred to ILP classes.

27e. ILP Begin Date: for youth ages 16-21 enter the date the child begins ILP classes.

27f. Leave blank.

#### TPR/ADOPTION INFORMATION:

\* 28-30. TPR Status and Date: For the Mother, Legal Father, and Putative Father, enter codes to indicate the status of the parental rights of each. If the parent is deceased, use code 8 (deceased). Enter an effective date for each status. **If there is no Legal or Putative Father, code 7 (not applicable), and the date the SS-61 is completed would be entered. However, code 7 should only be used after TPR information for the remaining parents has been entered. Code 7 cannot be used as the TPR status for the mother.** These fields must be completed for children with permanency goal 2 and as applicable for permanency goal 3. These fields will not be completed for a CYAC child. Please note the following:

- Previously entered TPR information can be deleted by entering an asterisk (\*) in the appropriate TPR status and TPR date field.
- If child is entering legal status 2 or 5, parent termination information must be entered.

- \*31. Adoption Resource Code: Enter the code which indicates if the child is in need of an adoptive resource. This field must be completed for children in CD custody with a goal of adoption (goal 2 or 3) and may be completed for children in legal status 4 (care and custody with juvenile court/other agency) with a goal of 2 or 3.

If the code "S" is reported for children with the goal of adoption, but placement type ADF, ADR, ADO or FAH is not reported within 60 days, an exception notice will be generated to the worker.

32. Emergency Assistance Services Authorization Start Date:

This field (titled EAS Auth. Date on the SS-61) is completed using the Emergency Assistance Services Authorization Start Date on the CS-EAS-1 form. The date is entered as a six digit number (e.g., 05-01-91).

The EAS Authorization Start Date will be used as the start date to allow for payment of all authorized emergency services provided for up to 365 days after this date. After the date has been entered into the system, edits will prevent changing the date until twelve (12) months have elapsed. This edit is to restrict claiming allowable services more than once within a twelve month period.

In some cases, the first service for the family may be authorized before the child has been set up in ACTS. When this occurs, staff should enter the date recorded on the CS-EAS-1 completed for the family, even though this date will be a date in the past. ACTS will allow backdating up to 90 days in the past in order to allow entry of the correct EAS Authorization Start Date.

In many cases, a child in ACTS will also be listed as a household member in the Protective Services systems (whereabouts code of 3). If there is no EAS Authorization Start Date for the child in ACTS or PS, or the EAS date is over one year old, the EAS Authorization Start Date can be entered from either the PS or the ACTS systems. When this date is entered in the PS system it will automatically update the EAS date in ACTS. This is because the child in ACTS is considered a member of the PS household, even though (s)he resides out of home in alternative care. It is important that all children in ACTS, who are part of a Protective Services household, are included as household members in the PS system so that the EAS dates remain consistent.

NOTE: When a child in ACTS who has an EAS Authorization Start Date is being added to a PS household that has a different EAS authorization begin date, the EAS date in the PS system will not be updated with the date in ACTS. Instead, an error report will be sent to the Children's Division Payment Unit identifying the discrepancy in EAS dates. You will be contacted by the payment unit in order to resolve the date discrepancy.

33. Leave this field blank.

### ICPC INFORMATION:

ICPC information is entered for children placed into or out of Missouri, e.g., placements in which CD or the other state retains legal custody and/or supervision and the placement is still an alternative care placement (out of the parent's home), or if the child is in an adoptive home and in the temporary custody of the adoptive parent. If the child is placed with a parent in or out of Missouri, the SS-61 would be closed and the ICPC information would be reported on the Protective Services Interstate Placement Form (SS-64). A Protective Service Case Form (SS-63) must be open on the parent(s) prior to the SS-64 form being reported into the system.

For Fields 34-39, complete as many fields as possible for the ICPC client at the time of placement, or as soon as information is available.

The worker will receive a reminder notice in 90 days if all fields (34-39) are not completed for ICPC clients. The worker will continue to receive a reminder until information has been entered in all of the ICPC fields.

### SPECIAL INSTRUCTIONS:

The following matrix explains what information should be reported in certain fields when ICPC is involved.

ACTION	ICPC FIELDS 34-39	SCHOOL DISTRICT FIELD 14	PLACEME NT MODE FIELD 44	FUND CATEGORY FIELD 55
Children placed out of Missouri through ICPC	complete fields	enter 999-999	enter 6	any for * which eligible
Non-Alternative Care IV-E Children placed into Missouri through ICPC	complete fields	enter applicable code	enter 7	11
A/C IV-E children placed in Missouri through ICPC	complete fields	enter applicable code	enter 7	02 - open for Medicaid only
Adoption not finalized, and adoption subsidy recipient moves out of Missouri	complete fields	enter 999-999	enter 6	03,04 or 05

Adoption finalized and adoption subsidy recipient moves out of Missouri	do not complete or delete, if previously entered	enter 999-999	enter 8	03,04 or 05
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\*Children who enter or re-enter care, with a legal status of 1 (CD Care and Custody) or 7 (CYAC child) will automatically have Fund Category 12 (Title XIX FFP) entered in this field unless the child's placement type is RUN, DET or the DMH residential treatment facility, Cottonwood. In this situation, Fund Category 01 (HDN) will automatically be entered. Thereafter, only the eligibility specialist can update this field as long as the child remains in legal status 1 or 7 (and not in an adoptive placement).

NOTE: When a child is no longer in an interstate placement and fields 34-39 are no longer applicable, an asterisk (\*) should be entered in each field to delete this information on the form.

- \* 34. ICPC Placement Source: Enter the code for the source of placement of the ICPC client. If code D is entered, completion of fields 22, 23, and 24 is optional.
- 35. Date ICPC-100A Signed by Sending State: Enter the date the ICPC-100A was signed by the sending state.
- 36. Date ICPC-100A Signed by Receiving State: Enter the date the ICPC-100A was signed by the receiving state.
- \* 37. Retroactive Compliance: Enter the code to indicate if the ICPC agreement was brought into compliance retroactively.  
  
Y - Yes - Child was placed prior to placement approval given by receiving state (not in compliance).  
  
N - No - ICPC compliance met prior to placement.
- \*38. Subsidized Placement: Enter the code to indicate if the ICPC placement is being subsidized by the sending state (foster care or adoption subsidy payment). This does not include the child's outside income or support from family.
- \*39. Receiving/Sending State: Enter the two-letter code of the other state (other than Missouri) involved in the ICPC placement.
- \*40. Infant Drug Exposure: Enter up to 4 codes (A-D) or Z only (if Z is entered, no other codes can be entered). A code must be entered in the first position of the field. The same alpha code can only be entered once. (e.g., "A" can only be entered one time.) Any error will be designated by the message "Highlighted fields in error." Any code entered in error may be deleted by using the space bar. (Documentation from a physician is required for codes A-D. This field must also be completed for a CYAC child.) **This is a required field.**

#### **SECTION C - PLACEMENT, PAYMENT AND TITLE XIX INFORMATION:**

**PLACEMENT INFORMATION:**

Fields 41 - 48 are a block for all placement types except ILA, SCH, RUN, DET or CTO. Refer to the following matrices for more specific information in completing fields 41 - 48.

**Placements must be reported into the system in the order in which they occur.** If a placement is missed or a placement entered incorrectly, their circuit payment specialist or CSPU should be contacted as this may result in a payment error. A child's return home should not be entered in ACTS as a placement as these are tracked in the PS system. However, if a child has gone home for a trial visit (a maximum of one hundred eighty (180) days), with his/her parent(s) prior to the court relieving CD of custody, the child's SS-61 should remain open. The Placement Subtype should be coded as trial home visit-'A'.

**SPECIAL INSTRUCTIONS:**

FIELD	FIELD NAME	To report a new placement or a change in the placement (e.g., from FHO to ADF - same vendor.)	To correct placement information
Field 41	Placement Code	Enter Code 1	Enter Code 2
Field 42	Placement Begin Date	Complete Field	Only complete if being corrected
Field 43	Placement Reason	Complete Field	Only complete if being corrected
Field 44	Placement Mode	Complete Field	Only complete if being corrected
Field 45	Pre-Placement Visit	Complete Field	Only complete if being corrected
Field 46	Vendor Number	Complete Field	Only complete if being corrected
Field 47	Placement Type	Complete Field	Only complete if being corrected
Field 47a	Placement Subtype	Complete Field if the Placement Type is CTO-B or the child is on a trial home visit.	Only complete if being corrected
Field 47b	Pre-Adoptive Placement	Enter yes or leave blank	Only complete if being corrected



<b>Field 47c</b>	<b>Family Structure</b>	<b>Complete Field if the Placement Type is FHO, FHB, FHE, FHM, RHO, RHB, RHM, RHU, KHO, KHB, KHM, KHU, ADF, ADR, ADO, FAH, FGH, FGB, FGM, or CFP.</b>	<b>Only complete if being corrected</b>
<b>Field 48</b>	<b>Vendor Name</b>	<b>Complete Field</b>	<b>Only complete if being corrected</b>

- \*41. Placement Code: Enter the code to indicate the type of placement action being taken.

Use placement code 1 to indicate that a child is in a new placement or that he has moved. The use of placement code 1 enters another line in the child's placement history. (The child's placement history can be viewed using the system transaction, ZPLA.)

Example: The child moves from placement type FHO to ADF. Use placement code 1 even if he remains with the same provider.

Use placement code 2 to correct an error in the current placement. The use of placement code 2 causes information to be replaced. It does not enter another line in the child's placement history. Errors detected in past placements should be corrected by contacting the CPAY unit in central office. Placement code 2 should also be used if the child's placement has not changed, but it is necessary to report or update fields.

Example: The child is no longer eligible for Medicaid. Use placement code 2 to enter the Title XIX End Date.

Example: Placement Type FHB was entered in error. Use placement code 2 to change the FHB to the correct placement type.

42. Placement Begin Date: Enter the date in which the current placement began or the date the placement type changed with the vendor remaining the same (e.g., change from foster home to adoptive home). The same date may be reported twice if a different placement with a new vendor is being reported. If the vendors are to receive payment, the second vendor will receive the payment in this situation as this is the vendor with whom the child spent the night. The placement begin date for a CYAC child is the same date that is entered for the CYAC parent or the date of the CYAC child's birth if born while CYAC parent is in care.

- \*43. Placement Reason: Enter the code for the reason the **current** placement is being reported. Select the dominant reason if there is more than one.

For openings or re-openings, only the following placement reasons are allowed:

- 01 - Reason to Suspect CA/N
- 02 - Voluntary Relinquishment/Adoption
- 03 - Adoption
- 04 - Parent(s) Incarcerated
- 09 - Adoption Disruption
- 10 - After-care Disruption
- 11 - Parent Death/Illness
- 13 - Status Offender
- 14 - Voluntary Placement by Parent
- 16 - CYAC child (only allowed with legal status code 7)
- 17 - Chafee Support
- 18 - Legal Guardianship Awarded
- 19 - Voluntary Placement Agreement

For updating only the following codes should be used:

- 01 - Reason to Suspect CA/N
- 03 - Adoption
- 05 - Placed with Relative
- 06 - Move into regular placement from emergency placement
- 07 - Case plan achieved
- 08 - Alternative care disruption
- 09 - Adoption Disruption
- 10 - After-care Disruption
- 12 - Foster parent death/illness
- 13 - Status Offender
- 15 - Other
- 16 - CYAC child (only allowed with legal status code 7)
- 17 - Chafee Support
- 18 - Legal Guardianship Awarded

- \*44. Placement Mode: Enter the code to indicate the circumstances under which the child is opened or re-opened in the alternative care system, moves from one placement to another, or when the child is placed in or out of Missouri in an interstate placement.

NOTE: For a CYAC child, the placement mode will be "0" (zero). This placement mode is only allowed with the legal status code 7 (CYAC child).

**SPECIAL INSTRUCTIONS FOR FIELDS 41 - 48:**

<b>ACTION</b>	<b>To report initial placement in foster care</b>	<b>To report a new placement</b>	<b>To report child in CD custody placed out of Missouri</b>	<b>To report placement of a child from another state into Missouri ICPC or ICAMA</b>	<b>To report the placement of a child who resides within Missouri but has an out-of-state address</b>	<b>To report placement - not the result of a CA/N report</b>	<b>To report placement type ILA, SCH, RUN, or DET</b>	<b>pl</b>
<b>PLACEMENT CODE FIELD 41</b>	Enter Code 1	Enter Code 1	Enter Code 1	Enter Code 1	Enter Code 1	Enter Code 1	Enter Code 1	E
<b>PLACEMENT BEGIN DATE FIELD 42</b>	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	
<b>PLACEMENT REASON FIELD 43</b>	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	
<b>PLACEMENT MODE FIELD 44</b>	Enter code 1, 2 or 3	Enter code 3 or 4	Enter code 6	Enter code 7	Enter code 8	Enter code 9	Enter appl. code	I
<b>PRE-PLACEMENT VISITS FIELD 45</b>	Complete field	Complete field	Complete field	Enter either Y or N	Complete field	Complete field	Complete field	
<b>VENDOR NUMBER FIELD 46</b>	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	Leave Blank	L
<b>PLACEMENT TYPE FIELD 47</b>	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	
<b>PLACEMENT SUBTYPE FIELD 47A</b>	Complete field if CTO	Complete field if CTO or trial home visit	Complete field if CTO or trial home visit	Complete field if CTO or trial home visit	Complete field if CTO or trial home visit	Complete field if CTO or trial home visit	Leave blank	
<b>PRE-ADOPTIVE PLACEMENT FIELD 47B</b>	Enter Y if applicable	Enter Y if applicable	Enter Y if applicable	Enter Y if applicable	Enter Y if applicable	Enter Y if applicable	Leave Blank	
<b>FAMILY STRUCTURE FIELD 47C</b>	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	Enter code 0	E if v
<b>VENDOR NAME FIELD 48</b>	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	Complete field	

- \* 45. Pre-Placement Visit: Enter the code to indicate whether a pre-placement visit(s) occurred prior to the child's placement in the facility being reported.

NOTE: This field must be completed for all children. For a CYAC child, the pre-placement visit code "M," (CYAC child) must be entered.

46. Vendor Number: Enter the Departmental Vendor Number (DVN) assigned through the vendor subsystem to the vendor with whom the client is being placed. This is a nine-digit number. A vendor number will not be entered for placement types ILA, SCH, RUN, DET or CTO. For a CYAC child, the same DVN entered for the CYAC parent will be entered for the CYAC child.

- \* 47. Placement Type: Enter the code for the type of placement being reported. See Field 55, Fund Category, to determine which category applies to a placement type. For a CYAC child, the same placement type entered for the CYAC parent must be entered for the CYAC child. The placement type definitions specify which placements cannot be used for a CYAC child.

Definitions of placement types are as follows:

FHO - Foster Home - a licensed foster home caring for six or less children.

FHB - Behavioral Foster Home - a CD licensed foster family home in which a child in CD custody is placed who has been approved for behavioral foster care. Refer to CWM Section 4.11 Attachment A, for monthly maintenance and incentive payment amounts for which the child is eligible.

FHE - Emergency Foster Home - a foster home which has been specifically licensed to care for six or less children in CD custody on an emergency basis only. These foster homes are available to receive children on a 24 hour basis. These foster homes are only used on a short term basis not to exceed 30 days.  
When the child is moved into a regular placement, that placement should be reported as a new placement (Code 1 in Field 41).

FHM - Medical Foster Care - a CD licensed foster family home which has medical knowledge of a child's need and in which a child in CD custody is placed and has been approved for medical foster care.

Refer to the CWM Section 4.11 Attachment A, for monthly maintenance payment amounts for which the child is eligible.

RHO - Relative Home - a relative provider who has completed licensing and training in order to care for related children (Refer to the CWM Section 6.3.1, for additional information pertaining to licensure of a relative home.)

RHB - Behavioral Relative Home - a licensed relative home which has completed Behavioral training and in which a related child in CD

custody who has been approved for behavioral care is placed. Refer to CWM Section 4.11 Attachment A for monthly maintenance and incentive payment amounts for which the child is eligible.

RHM - Medical Relative Home - a licensed relative provider who has medical knowledge of a child's needs and in which a related child in CD custody who has been approved for medical care is placed. Refer to CWM Section 4.11 Attachment A for monthly maintenance payment amounts for which the child is eligible.

RHU- Unlicensed Relative Home – an unlicensed relative home which has been ordered by the court to care for a related child who is in CD custody.

KHO- Kinship Home – a non-relative kinship home in which licensing and training have been completed in order to provide care for a non-related child in the custody of the CD.

KHB- Behavioral Kinship Home – a licensed non-relative kinship provider who has completed Behavioral training and in which a non-related child in CD custody who has been approved for behavioral care is placed.

KHM- Medical Kinship Home – a licensed non-relative kinship provider who has medical knowledge of a child's needs and in which a child who has been approved for medical care is placed.

KHU- Unlicensed Kinship Home – an unlicensed non-relative kinship provider who has been ordered by the court to provide care to a child with whom there are close ties and is in CD custody.

ADF - Adoptive Home - Foster - a CD, private agency, DMH or DYS foster family which is approved as an adoptive home in order to adopt the child in their care. Refer to the CWM Section 6.3.3 for instructions regarding when to report this placement type.

ADR - Adoptive Home - Relative - an approved CD, private agency, DMH or DYS adoptive home in which the family is adopting a related child placed in their home. Refer to the Alternative Care Handbook for instructions regarding when to report this placement type.

NOTE: A relative home adopting a child who is not eligible to receive a maintenance payment can be licensed for Foster/Adoptive Care (FAH) and receive Alternative Care payments. (See CWM Section 6.3.3 for further information.)

ADO - Adoptive Home - Other - an approved CD, DMH, DYS or private agency adoptive home in the process of adopting a child who is

unrelated to the adoptive family or has not been placed in the home as a foster child.

NOTE: An exception notice will be generated when a child has been in placement type ADO, ADF or ADR for over 90 days and legal status 1 (CD care and custody) is still reported. Thereafter, a monthly exception notice will be generated until the legal status has been changed to 2 (temporary custody with adoptive parents) or 5 (final custody awarded to adoptive parents). For judicial circuits which do not award custody until finalization, disregard the reminder report.

FAH - Foster/Adoptive Home - a CD approved adoptive home licensed to provide foster/adoptive care. See CWM Section 6.3.3, for information on when this placement type is eligible for payment.

NOTE: Children in the custody of a Class I Juvenile Court may also be placed in a Foster/Adoptive Home. These children are eligible for maintenance and Title XIX only through HDN funds.

FGH - Foster Family Group Home - a foster home licensed to provide care in their own home for 7-12 non-related children.

FGB - Behavioral Foster Family Group Home - a foster family group home licensed to care for 7-12 non-related children in which a child in CD custody, approved for behavioral foster care is placed. Refer to the CWM Section 4.11 Attachment A, for monthly maintenance and incentive payment amounts for children in this type of placement.

FGM - Medical Foster Family Group Home - a foster family group home licensed to care for 7-12 non-related children in which a child in CD custody, approved for medical foster care is placed. Refer to the CWM Section 4.11 Attachment A, for the monthly maintenance payment amount for which the child is eligible.

CFP - Career Foster Parent Placement - a foster home licensed to care for children in the Career Parenting program. The capacity for these foster parents is four children and includes a maximum of two children who qualify for placement with Career Foster Parents.

RFA - Residential Facility - a residential child care agency licensed by the Residential Program Unit to provide residential treatment for children and youth. Maintenance and treatment costs for the child are paid from SEAS using the CS-65A form. These residential child care agencies are paid a contracted per diem rate which includes maintenance. For those residential treatment agencies

which are paid only a maintenance rate, the RCST will process the payment. Therefore, for all residential childcare agencies, the maintenance code entered on the SS-61 must be "3" (no maintenance) in Field 56.

JHO - Juvenile Court Home - any facility, including foster and group homes, which is operated and approved by the Juvenile Court, but not licensed or approved by the Residential Program Unit. (This placement type does not include detention facilities. See DET placement type in these instructions.)

This placement type is used for children in the custody of the Juvenile Court in Class I counties (e.g., Clay County, Green County, Jackson County, St. Louis City and St. Louis County) who have been adjudicated as HDN and are receiving foster care payments. Other placement types should be reported for these children as appropriate. This placement type cannot be used for a CYAC child.

NOTE: If Class I Juvenile Courts elect to have their facility(ies) licensed by CD, the facility would be set up in the vendor system as FH or RF vendor types in the ACTS Vendor Subsystem (FHO or RFA placement types on the SS-61). If the facility is to be licensed as a RFA, the Residential Program Unit is responsible for licensing the facility.

If a child in CD custody is placed in a Juvenile Court facility, the facility must be licensed or certified by CD in order for the child to receive payment. In this event, the child's placement type would be changed from JHO to the appropriate placement type, e.g., FHO.

MMD - Medical Facility - any medical hospital. This placement type is set up in Central Office (CSPU). Please submit SS-60 and W-9 to open this vendor. This placement type cannot be used for a CYAC child.

MMH - Mental Health Facility - a mental health facility, psychiatric hospital or DMH foster home in which a child in CD custody is placed. This placement type is set up in Central Office (CSPU). Please submit SS-60 and W-9 to open this vendor. A mental health facility or psychiatric hospital placement type cannot be used for a CYAC child. A CYAC child may be placed with a CYAC parent in a DMH foster home.

TLG - Transitional Living Group Home – A licensed, residential child care site where older youth (ages 16-20) concentrate on preparation for independent living and completion of their educational/vocational programs in a supervised group setting. Youth are expected to maintain

employment and develop goals and plans for their future. Update the youth's SS-61 to show the youth placed in a TLG placement type. Field 56 (maintenance code) must be a 3 (no maintenance).

- TLS - Transitional Living Scatter Site – Youth who are considered for this type of placement must demonstrate the ability to live independently with some support services and must have successfully completed the ILP Life Skills classes. If a TLS placement is selected by the FST, the case manager must submit the updated CS-9 to the RCST Coordinator as a referral. The case manager, or service worker for the youth, shall also complete the TLP Scattered Site Apartment Checklist (CS-TLP-2) to ensure the living arrangements are appropriate. The case manager or service worker should complete the CS-TLP-2 every six (6) months or anytime a youth changes residences. The youth's SS-61 shall be updated showing a placement to a child who has been in the custody of CD, DYS, DMH or another licensed child placing agency. Field 56 (maintenance code) must be a 3 (no maintenance).
- LGS - Legal Guardianship Subsidy – Qualified relatives (grandparents, aunts, uncles, adult siblings, or first cousins to the child) who obtain legal guardianship of a child in the custody of the Children's Division.

The following placements must not have vendor numbers in Field 46. In addition, these placement types are not to be used for a CYAC child with the exception of ILA and CTO.

- ILA - Independent Living Arrangement - For youth with a permanency goal of independence and self-sufficiency, this placement type should be the next step in the natural progression after successfully completing a Transitional Living Scattered Site placement. In this placement, a youth lives on his/her own, usually in an apartment or college campus setting, with supervision from the case manager. A direct payment of \$307.00 per month is made to the youth who is responsible for paying all of his/her own bills and rent. Refer to CWM Section 4.11 Attachment F for CYAC Parent and child procedures.
- SCH - School - This placement type includes the Missouri School for the Blind and the Missouri School for the Deaf when the child is a resident of the school.
- RUN - Runaway - a child in the care and custody of CD who leaves a placement without permission.
- The Maintenance Code (Field 56) should be updated to 3 (No Maintenance Payment) at that time.
- DET - Detention - a secure or semi-secure facility in which a pre-adolescent or adolescent in the care and custody of CD is placed temporarily (normally up to 30 days) until an appropriate



placement can be located. This placement type should be of short duration and is not considered a permanent plan. Children, placed in a detention facility, are placed there because a more suitable placement has not yet been located.

CTO - Non-Licensed Court Ordered Placement - a non-licensed, non-certified or non-approved facility in which the child is placed by the family or court and the court gives CD legal custody or orders CD to supervise the placement.

**Note: If Field 47 is CTO then Field 47a must have 'B' –facility entered into it.**

TLA - Transitional Living Advocate – The transitional living advocate is an adult, 21 years of age or older, who provides the youth a safe place to stay, continued life skills training, encouragement and guidance in regard to employment, education and/or training, and preparation for successful transition from CD custody. Prior to approval, the advocate must complete the following:

- Successful completion of 18 hours of pre-service, specialized training on adolescent issues through CD including three (3) hours each in cultural/race sensitivity, ILP life skills training overview, adolescent development with an emphasis on what to expect from adolescent behavior, emotional obstacles out-of-home care youth must overcome, adolescent sexuality and behavior management via natural consequences;
- A criminal and child abuse/neglect background screening;
- An approved home study completed by the CD case manager/service worker, in the county that the advocates reside;
- A signed copy of the CM-12, Agreement for the Purchase of TLP Advocate Services; and
- Register with the Family Care Safety Registry

Youth are encouraged to have pre-placement visits with an approved advocate to increase the likelihood of a successful match. Once the TLA placement occurs, the youth receives \$586 per month of which \$450 is paid to the advocate by the youth.

\*47a. Placement Subtype: If the child is on a trial home visit or his placement type is CTO, enter the appropriate placement subtype.

A - Trial Home Visit:

The child in CD custody, has been in an out of home placement, but has been returned home on a trial visit. Trial home visits are understood to be court ordered,

therefore, the placement type, vendor name and vendor address do not change when a child goes on a trial home visit (i.e. do not enter the biological parents' address). Enter placement code 1 in field 41, the subtype A in field 47a, the new begin date, and code 3 (no maintenance) in field 56.

**B – Court Ordered Facility (CTO):**

A non-licensed, non-certified or non-approved facility in which a child is placed and the court gives CD legal custody or orders CD to supervise the placement.

**S – Adoption/Guardianship Residential Treatment:**

This placement subtype is used when a child who is receiving adoption subsidy or subsidized guardianship and requires treatment in a residential treatment or mental health facility.

**V – Voluntary Placement Agreement (NOTE: THIS APPLIES TO CHILDREN IN LS 5 AND LS 1 ONLY).**

- \*47b. Pre-Adoptive Placement: Enter a “Y” for yes if this child is in a pre-adoptive placement with the vendor. Leave this field blank if the child is not in a pre-adoptive placement. If the placement changes and is no longer pre-adoptive, enter an “N” on the SS-61 turnaround.

Note: This field should only be yes if the child’s Guardian Ad Litem and/or the court agrees with the PPR recommendation that this is a pre-adoptive placement.

- \*47c. Family Structure: - Enter the code which best indicates the structure of the child’s current foster or adoptive family. Code 1, 2, 3 or 4 must be entered for the following placement types: FHO, FHB, FHE, FHM, RHO, RHB, RHM, RHU, KHO, KHB, KHM, KHU, ADF, ADR, ADO, FAH, FGH, FGB, FGM, and CFP.. Enter code “0” (not applicable) for all other placement types.

Codes 1 and 2 describe families where there are two adults in a relationship as a couple and caring for the child.

Note: If a caretaker is not living as part of a couple, use family structure code 3 or 4.

The structure of the family should be reported as “1” if the provider is a married couple, even if one parent is required to live elsewhere due to his/her profession, i.e. is in the military. The structure of the family should be reported as 3 or 4 for a single person even if that person is living with his/her parent(s).

- 48.. Vendor Name: Enter the name of the vendor whose vendor number is in Field 46.

CTO Provider Information-Do not enter demographic information when a child has a placement subtype of A-trial home placement or B-Court Ordered Facility.

Entries should be made in Fields 49 through 53 only if the Placement Type is ILA, SCH, RUN, DET or CTO facility. If the placement type is ILA or CTO (facility), the address where the client is living should be entered.

If the placement type is RUN or DET, the county office address should be entered. For placement type SCH, either the address where the client is residing or the county office address can be used. If only a portion of the address changes, only the portion of the address that has been changed must be re-entered in the gray area.

NOTE: For placement types FHO, FHB, FHE, FHM, RHO, RHB, RHM, RHU, KHO, KHB, KHM, KHU, ADF, ADR, ADO, FAH, FGH, FGB, FGM, TLA, TLG, TLS, RFA, JHO, MMD, MMH and CFP an address change must be reported via the SS-60 form.

49. Address Line 1: Enter the first line of the street address. If the address is a rural route or post office box only, it should be entered. When a client does not have a street address or post office box number, the words "General Delivery" should be entered.

50. Address Line 2: Enter the second line of the street address. If a post office box number is used along with a street address, it should be entered. This is an 18-position field.

NOTE: To delete information in this field, an asterisk (\*) must be reported in this field.

51. City: Enter the city address of the client.

52. State: Enter the two-letter abbreviation for the state address of the client.

53. Zip Code: Enter the zip code of the client. Five digits are required, but as many as nine digits may be entered.

NOTE: If a child moves from a placement type that requires an address to be entered to one which does not, an asterisk (\*) should be entered in each of the above fields.

54. Alternative Care IV-E Eligibility Information:

See instructions below for reporting the Alternative Care IV-E or Title XIX FFP eligibility determination date.

ALTERNATIVE CARE IV-E: Use of this field is restricted to the Eligibility Specialist. This field is completed for children in the custody of CD (legal status 1). The Eligibility Specialist enters the date (MMDDYY) the child was determined eligible for Alternative Care IV-E on the ZCES screen. This information will be displayed on the ZCAS inquiry screen.

If this field is not completed within sixty (60) days of the child's entry or re-entry into Alternative Care and every six (6) months thereafter (if determined eligible for Alternative Care IV-E), an overdue notice will be generated to the Eligibility Specialist.

NOTE: An Alternative Care IV-E eligibility determination is not completed for a CYAC child as the child's eligibility is based upon the IV-E parent's eligibility.

The Eligibility Specialist does not complete this field for Alternative Care IV-E children placed through ICPC or opened through ICAMA.

TITLE XIX FFP: Use of this field is restricted to the Eligibility Specialist. If the child is ineligible for Alternative Care IV-E, the Eligibility Specialist determines eligibility for Title XIX FFP. If the child is eligible for Title XIX FFP, the Eligibility Specialist enters the eligibility determination date and reports or re-enters fund category 12 (Title XIX FFP) on the ZCES screen. This information will be displayed on the ZCAS inquiry screen.

An eligibility determination must also be completed for a CYAC child whose parent is not Title IV-E eligible.

If the child has been determined ineligible for Alternative Care IV-E and Title XIX FFP, the date the Title XIX FFP eligibility determination was completed must be entered to designate an eligibility determination was completed. The fund category is changed to 01 (HDN).

The Eligibility Specialist will receive an annual reminder notice 30 days prior to the FFP eligibility redetermination date. If the redetermination date isn't entered timely, an overdue notice will be generated to the Eligibility Specialist. An IV-E overdue notice is also generated to the Eligibility Specialist for children who have fund category 12 entered, but no eligibility determination date entered.

NOTE: For children determined Title XIX FFP eligible (fund category 12) whose eligibility code is "Y," the ES will receive a redetermination notice every 6 months instead of annually.

ELIGIBILITY CODE: Use of this field is restricted to the Eligibility Specialist. If the child has been determined eligible for Alternative Care IV-E even though not

reimbursable, the Eligibility Specialist enters a Y (Yes) at the time the Alternative Care IV-E eligibility determination date is entered. If the child is ineligible for Alternative Care IV-E, the Eligibility Specialist completes the Title XIX FFP eligibility determination and enters one of the following codes at the time the Title XIX FFP eligibility determination date is entered.

- A - No court order with contrary to the welfare of the child language
- B - No AFDC relatedness
- C - No physical removal
- D - Age

This information is entered on the ZCES screen by the Eligibility Specialist and will be displayed on the ZCAS inquiry screen.

If the child's fund category is "02" (Alternative Care IV-E) or "04" (Adoption Subsidy IV-E), a "Y" code must be entered.

REIMBURSABLE CODE: A IV-E reimbursable code must be entered for children who have been determined IV-E eligible. At the time eligibility is determined or redetermined, the ES must enter one of the eight codes specified below to indicate the child's IV-E reimbursability:

- Y - Yes
- A - No court order with reasonable efforts language
- B - Age
- C - Financial need
- D - Concurrent receipt of SSI
- E - Deprivation
- F - Non-reimbursable placement
- G - Receipt of AFDC

This code can be updated, however, the previous code will not be retained. A child must be age 18 before code "B" is allowed. If the IV-E eligible code "Y" is entered, but the fund category is not "02" or "04", a IV-E reimbursable code A-G is required.

For Codes F (Non-reimbursable placement) and G (Receipt of AFDC), Code G should always be used whenever AFDC is received in behalf of a child, even if the child is in a non-reimbursable placement.

Fund category 11 (Not Eligible/No Request) should be used in conjunction with code G.

Medicaid Source Code: The system will automatically assign a Medicaid Source Code for children whose fund category is 01, 02, or 12 who are in legal status 1 or 7 and for children who are in legal status 4 and case manager counties 346, 348-351. This field will be blank for all other children.

This code notifies the Division of Medical Services (DMS) which source to use to pay the child's Medicaid claims.

The Medicaid Source Codes are defined as:

- 1 - GR (General Revenue Funds)
- 2 - IV-E (Alternative Care IV-E Funds)
- 3 - FFP (Federal Financial Participation)

The Medicaid Source Code assigned by the system will correspond to the child's fund category (e.g., the Medicaid Source Code 1 will be assigned to children with fund category 01).

For children determined eligible for Title XIX FFP, the system will assign a code 3. The ES must update the child's Medicaid Source Code when the child's state portion of Medicaid changes from GR to HIF or from HIF to GR. If the child's fund category changes from 12 to 01 or 02, the system will automatically update the Medicaid Source Code.

- \*55. Fund Category: The Fund Category should reflect the basis for maintenance payment and/or Medicaid eligibility. For children in legal status 1 (CD Care and Custody) or 7 (CYAC Child) who enter or re-enter care, the system will automatically enter fund category 12 (Title XIX FFP) for the child unless the child's placement type is RUN, DET or the DMH residential treatment facility, Cottonwood. In this situation, Fund Category 01 (HDN) will automatically be entered. Thereafter, only the eligibility specialist can update the fund category for legal status 1 or 7 children. However, for children in legal status 1 or 7, whose placement type is ADO, ADR, ADF or FAH, the CSW can also update the fund category.

When a child who was eligible for payment and Medicaid leaves Alternative Care, the Fund Category code should remain the same at the time of case closing (do not update to code 11 - Not eligible, if the child was eligible until the time of closing). Updating to fund code 11 will prevent payment for the child for the month in which the closing occurred. Refer to the Alternative Care Handbook, Procedures D-5 and D-16, pertaining to selecting the appropriate fund category.

The following defines when certain fund categories should be used:

01 - HDN

This Fund Category is used when the child has been determined ineligible for Alternative Care IV-E and Title XIX FFP. This fund category is also used for a CYAC child whose parent is eligible for HDN or for the CYAC child who doesn't meet Title XIX-FFP eligibility. This fund category must be used when a relative who receives AFDC for a child is to be reimbursed for special expenses (also see SS-61 Instructions for Fund Category 11). Use of this fund category is restricted to the Eligibility Specialist for children in legal status 1 or 7 unless the child is in an adoptive placement.

02 - Alternative Care IV-E

This Fund Category is used when the client who is in CD custody has been determined eligible for Alternative Care IV-E. This fund category is also used for a CYAC child whose parent is eligible for IV-E. Use of this fund category is restricted to the Eligibility Specialist for children in legal status 1 or 7, unless the child is in an adoptive placement.

03 - Adoption Subsidy - HDN

This Fund Category is used when a child is approved for adoption subsidy payment and/or Medicaid and was not previously approved or eligible for Alternative Care IV-E payment. Private Agency, DMH and DYS Adoption Subsidy children are eligible only for this Fund Category. This fund category is entered by the CSW.

04 - Adoption Subsidy - IV-E

This Fund Category is used when a child who was eligible or approved for Alternative Care IV-E prior to adoption is approved for adoption subsidy. This fund category is entered by the CSW.

05 - Adoption Subsidy - FFP

This Fund Category is only to be used for a child who has been approved for Adoption Subsidy and also receives SSI. This fund category is entered by the CSW.

06 – Subsidized Guardianship

This fund category is used when a child is placed in the home with a relative who has obtained legal guardianship and has been approved for the subsidized guardianship program. This fund category is entered by the Case Manager.

NOTE: An Adoption Subsidy Agreement must be in effect; i.e., signed by the Division Director, before fund category "03", "04" or "05" is used. Refer to the CWM Section 4.30, for more information related to the Adoption Subsidy program and the use of these codes.

07 - Indochinese

This Fund Category is used when the client is eligible for the Refugee Assistance Program. Use of the fund category is restricted to the Eligibility Specialist for children in legal status 1 or 7 unless the child is in an adoptive placement.

08 - Cuban or Haitian

This Fund Category is used when the client is eligible for the Refugee Assistance Program. Use of the fund category is restricted to the Eligibility Specialist for children in legal status 1 or 7 unless the child is in an adoptive placement.

10 - Russian Jew or Ethiopian

This Fund Category is used when the client is eligible for the Refugee Assistance Program. Use of the fund category is restricted to the

Eligibility Specialist for children in legal status 1 or 7 unless the child is in an adoptive placement.

11 - Not Eligible/No Request (For Maintenance Payment and Title XIX)

This Fund Category is used when the client is not eligible for Medicaid and maintenance payment as an alternative care client, or Medicaid and maintenance have not been requested for the client. Use of this fund category is restricted to the Eligibility Specialist for children in Legal Status 1 or 7, unless the child is in an adoptive placement.

Examples are:

Children placed into Missouri through the ICPC. However, if the child is eligible for Alternative Care IV-E, the child is eligible for Medicaid only using the appropriate fund code "02". Refer to the CWM 4.25.2 for more detailed information;

Children who are placed in the temporary custody of adoptive parents and are ineligible for adoption subsidy payment;

Children placed with a relative who receives AFDC and Medicaid through the AFDC program. Children who are in CD custody who are placed with a relative are eligible for special expenses if special expenses are to be paid, the child's fund category must be changed to 01 (HDN).

Children placed with a relative or in a facility which does not request maintenance or Medicaid for the child.

12 - Title XIX FFP

This Fund Category is automatically entered by the system for all children whose legal status is 1 (CD care and custody) or 7 (CYAC child) at entry or re-entry in care (unless the placement type is ILA, DET or the DMH residential facility, Cottonwood) and when a child has been determined eligible for Title XIX FFP. Under this Fund Category, maintenance is paid through HDN and Medicaid is matched by federal funds. Use of this fund category is restricted to the Eligibility Specialist for children in legal status 1 or 7 unless the child is in an adoptive placement.

The ES will also use this fund category for Class I Juvenile Court children who are open in ACTS and have been determined eligible for Title XIX/FFP. The ES should refer to Chapter 7 in the Financial Assistance Policy and Procedure Manual for eligible living arrangements for Juvenile Court children.

Note: For children with a maintenance code of 6 (Career Parent Home Rate), the maintenance payment will be made with either a



fund code of 65 (Psychiatric Diversion HDN) or 66 (Psychiatric Diversion IV-E), depending upon the child's fund code in ACTS.

13 – Chafee Aftercare Youth

This fund code is used to provide services for former foster youth who left custody at age 17 1/2 but have not yet reached age 21.

MAINTENANCE INFORMATION:

- \*56. Maintenance Code: Enter the code which indicates the level of maintenance payment which the child is eligible to receive through the Children's Services Integrated Payment System (CSIPS). If the child is receiving outside income (SSI, Child Support, etc.) that income will be used for the maintenance payment prior to any state or federal funds being used.

The Children's Income and Disbursement System (KIDS) identifies all outside income deposited for a child in CD custody and in Alternative Care. This also includes children in CD custody or the temporary custody of the adoptive parents receiving Adoption Subsidy (refer to the CWM Section 4.11 Attachment D, CWM Section 4.30, and the CS-KIDS-1 and CS-KIDS-2 Instructions for further information pertaining to the use of a child's outside income). The child's income will be used first for the maintenance; then, the appropriate fund source (HDN, IV-E, etc.) will make up any difference in the cost of care. For children with outside income who are eligible to receive the standard maintenance rate, maintenance code "1 - Standard Rate" should be entered.

The outside income of children in Legal Status 7 (CYAC child) will not be deposited in KIDS (CWM Section 4.11).

The system will determine the correct amount of payment based on the child's age only when the standard rate (maintenance code 1) has been entered. When the child moves into a new age category, s/he will receive the new maintenance amount in the month in which his/her birthday occurs. The SS-61 turnaround form will continue to show the old amount until an update occurs. The system will display the new amount on the turnaround form, for those children receiving the standard rate.

When maintenance code 2 or 4 is used, the monthly amount to be paid must also be entered.

NOTE: If the child enters or leaves care in the middle of a month, the system will automatically calculate a partial month's payment. When the child leaves care and the SS-61 is closed, the maintenance code should not be changed to 3 (No Maintenance Payment) as this will prevent payment from being generated to the vendor with whom the child was placed at the time of closing.

The following examples explain when to use the various codes to complete the maintenance field.

1 - Standard Rate:

Indicates the child is eligible for the standard amount within his/her age category. If the child has outside income that will be used prior to any state or federal funds being used, the income will be processed through the KIDS system. It is not necessary to enter an amount as the system will calculate the correct amount.

2 - Below Standard Rate:

This code is used when the payment amount approved is less than the standard rate. This code will be used by Class I Juvenile Courts for children in their custody who are adjudicated HDN and are receiving outside income. As the court maintains the child's account and issues payment from the outside income source, this maintenance code will be used when the outside income is not sufficient to pay the full monthly amount. This code will be used for adoption subsidy children who are approved for less than the standard rate. The amount to be paid from the system must be entered in the amount field. This is a five (5) position field.

3 - No Maintenance Payment:

This code is entered if there is to be no maintenance payment made from the automated system. Only maintenance code 3 is allowed on the SS-61 for a CYAC child. Maintenance for a CYAC child will be paid through the CYAC parent's SS-61. (See instructions for Maintenance Code 4 below.)

NOTE: For children who have gone home for a trial visit with the parent(s), the maintenance code should be changed to 3 as the SS-61 will remain open showing the child's current placement. If the provider is owed partial month's care for the month in which the code change was made, the days owed should be paid on the CS-65, as code 3 will not generate any payment to the provider. Refer to the CWM 4.10.11, for additional information about trial visits.

4 - Above Standard Rate:

This code is used if approval has been received to generate a payment for a child who is above the standard rate for the age group. The monthly amount to be paid through the automated system must be entered in the amount field. The amount field is a five (5) position field. It is used when entering the payment amount for children who have been approved for Behavior or Medical Foster Care or when approval has been given by area office to pay above the standard rate.

Maintenance code 4 is also used to pay maintenance for a CYAC child. The amount entered will be the parent's maintenance rate plus the standard rate for the child based upon the child's age.

NOTE: An on-line edit has been established to disallow code 4 for private agency, DMH or DYS children who have been approved for Adoption Subsidy.

5 - Emergency Foster Home Rate:

This rate should be used for children placed in emergency foster homes with foster parents who are contracted to provide emergency foster care at a rate of \$22 per day. ACTS will automatically reimburse the emergency foster care provider at a rate of \$22 per day when this maintenance code is entered for the child. Payment for this service will be calculated in ACTS automatically at the end of each month, and payment will be generated on the first CSIPS payroll of the following month. Payment for this service will appear in CSIPS with a service code of "FHEM". These placements should not exceed 30 days.

Note: Emergency foster care providers must have an approved Emergency foster care amendment to their foster care contract in order for payment to be allowed.

Note: For Psychiatric Diversion children placed in Emergency foster homes, the maintenance code must be 3 (No Maintenance). These payments must be paid on a CS-65 using a fund code of 65 (field 14), and a service code of "FHEM" (field 15).

6 - Career Parent Home Rate:

This rate should be used for children placed in Career Parent foster homes and the Career Parents elect to receive \$47 payment per day for each Career Foster Parent child receiving care in their home. ACTS will automatically reimburse the Career Parent provider at a rate of \$47 per day when this maintenance code is entered for the child. Payment for this service will be calculated in ACTS automatically at the end of each month, and payment will be generated on the first CSIPS payroll of the following month. Payment for this service will appear in CSIPS with a service code of "MAIN" and a fund code of either 65 (Psychiatric Diversion HDN) or 66 (Psychiatric Diversion IV-E), depending upon the child's fund code in ACTS.

Note: Career Parent providers must have an approved Career Parent amendment to their foster care contract in order for payment to be allowed.

7 – Transitional Living Advocate Rate:

This rate is used for older youth placed in an approved transitional living advocate home. The Case Manager updates the system to reflect a TLA placement type and a maintenance code of 7 on the SS-61. It is necessary to enter an amount of \$586.

EXAMPLE 1:

A child receives a monthly OASDI payment that is less than the standard maintenance rate. The child has been determined eligible for Alternative Care IV-E. Alternative Care IV-E funds will supplement the OASDI income in order that the child receives the standard maintenance amount. As the child is to receive the standard rate for his/her age, the CSW will enter the maintenance code of 1 (standard rate). KIDS will make the necessary adjustments to make correct maintenance payments to the vendor.

55. FUND CATEG.	MAINTENANCE INFORMATION	56. MAINTENANCE CODE	AMOUNT
02		1	

**EXAMPLE 2:**

A child, age 12, is eligible to receive full maintenance payment from HDN because the child has no external income.

55. FUND CATEG.	MAINTENANCE INFORMATION	56. MAINTENANCE CODE	AMOUNT
01		1	

**EXAMPLE 3:**

Special approval has been given for a child, age 10, to receive maintenance payment of \$500.00 per month which is above the maximum amount for that age category.

55. FUND CATEG.	MAINTENANCE INFORMATION	56. MAINTENANCE CODE	AMOUNT
01		4	500.00

**INFANT ALLOWANCE SPECIAL EXPENSE PAYMENT**

A special expense payment, or infant allowance, has been established for children between the ages of 0 - 12 months. In addition to the standard maintenance rate, eligible out-of-home care providers will receive an additional fifty dollars (\$50.00) per month per child. The infant allowance payment will be automatically generated, along with the maintenance payment for all children opened on the SS-61. Children will be eligible for this allowance until the child reaches thirteen months of age.

This special payment is available for all children opened on the SS-61 with a Legal Status 1 or Legal Status of 7. The eligible placement types include:

- foster home placements
- licensed relative home placements
- licensed kinship home placements;

Children in Residential Treatment Facilities and children receiving maintenance through the Missouri Adoption Subsidy Program (MASP) are not eligible for the infant allowance special expense payment.

## TITLE XIX INFORMATION:

57. Title XIX Begin Date: Enter the date Title XIX (Medicaid) eligibility begins. This would begin with the date of protective custody or court ordered care and custody, whichever comes first. However, coverage will automatically go back to the first of the month or to the date of birth for children entering care during the month in which they were born.

NOTES: Any time a child who is eligible for Medicaid changes Fund Categories, a Title XIX Begin Date must be re-entered to reflect the date of eligibility under the current Fund Category.

The Title XIX begin date must also be updated to reflect the child's eligibility under Medicaid when the Medicaid Source Code is updated.

The Eligibility Specialist will update the Medicaid begin date for children in legal status 1 or 7 (unless the child is in an adoptive placement) whenever the child's fund category or Medicaid Source Code changes. The Eligibility Specialist will update this information on the ZCES screen. Any update by the ES will be displayed on the ZCAS inquiry screen.

The Medicaid begin date entered by the ES for Class I Juvenile Court children who are determined eligible for Title XIX FFP will be the date the court was awarded custody, (i.e., date of application on the IM-1) or the date the child became eligible (e.g., moved into an eligible placement). The begin date however, may not be prior to the date custody was awarded.

ZXIX (Title XIX History Inquiry Screen) will reflect the history of Alternative Care Medicaid.

For children who are eligible for Fund Category 02 (Alternative Care IV-E), the Medicaid begin date entered will be the date the E.S. updates the fund change.

The Title XIX begin date for Alternative Care IV-E and Adoption Subsidy children who move to Missouri from another state (Placement Mode 7), will be the date of verification of Title XIX eligibility in Missouri.

Refer to the CWM Section 4.30 and CWM Section 4.25.2, for further information for these children.

If a CYAC parent gives birth while in Alternative Care, the Title XIX begin date for the CYAC child will be the date of the child's birth. If a CYAC child enters care with a CYAC parent, the Title XIX begin date will be the date of the CYAC parent's placement. Refer to CWM Section 4.11 Attachment F, for additional information pertaining to the CYAC child.

58. Title XIX End Date: The date will be when this field is updated.

NOTE: If the child has gone home on a trial visit with the parent(s) prior to the court relieving CD of custody, Title XIX should not be closed until either the child has been placed with the parent or 180 days after the trial home visit begins, whichever comes first. The Medicaid card needs to be given to the parent(s) to use for the child. If the parent is approved for AFDC for the child during the trial visit, the Title XIX should be closed in ACTS so the child can receive Title XIX through AFDC. Refer to the CWM Section 4.10.11, for additional information regarding trial visits.

- b. The date the custody of a child is transferred from CD to a relative, adoptive parent or other agency even though CD retains supervision.
- c. The date of confirmation of the child's Medicaid coverage in the other state for Alternative Care IV-E or Adoption Subsidy IV-E children who move from Missouri (Placement Mode 6 or 8).

#### PSYCHIATRIC DIVERSION INFORMATION:

- 59. Psychiatric Diversion Begin Date: Enter the date the child was referred to the Psychiatric Diversion program. In many cases this date will be prior to the date the child was staffed by the Psychiatric Diversion team.
- 60. Psychiatric Diversion End Date: Enter the date the child was discharged from the Psychiatric Diversion program. This date indicates that the child has stabilized due to Psychiatric Diversion services, and is no longer in the program. In many cases these children will remain in the Division's custody, but are in a stable placement.

Note: The Psychiatric Diversion begin and end dates are retained in ACTS similar to the way Title XIX dates are displayed, so that information on children who participate in the program more than once will be available. The participation dates are available on the ZCPD (ACTS Psychiatric Diversion Inquiry) screen and is accessed by typing ZCPD and the child's DCN.

Sections D and E consist of information required by the federal Adoption and Foster Care Analysis and Reporting System (AFCARS). Non-identifying information collected in these sections, and elsewhere in the automated system, will be reported to the federal government. Missing data and/or late updating may result in loss of title IV-E federal funds.

#### REHABILITATION SERVICE INFORMATION:

- 60a. Rehabilitation Service Begin Date: Enter the date the child was determined eligible for Rehabilitation Services. This will be the date on which the CSPI was completed.
- 60b. Rehabilitation Service End Date: Eligibility for funding will follow the child, as long as specialized treatment services continue to be provided. This date will automatically be generated when the case closes or when the child no longer needs specialized treatment services. There should be no manual entries made in this section.

Note: The Rehabilitation Service Begin and End Dates are retained in ACTS similar to the way in which Title XIX and Psychiatric Diversion dates are displayed. Information for a child who has multiple rehabilitation begin and end dates is available on the ZCRI (ACTS Rehabilitation Inquiry) screen and can be accessed typing ZCRI and the child's DCN.

60c. CMO Enrollment Date: This is not an entry field. This date is captured from the **ZCMO screen** and is displayed in ACTS in order to identify children who are enrolled in the **Specialized Care Management Contract** with a Care Management Organization (CMO). A date entry in this field prohibits all SEAS authorizations and CSIPS payments.

60d. CMO Disenrollment Date: This is not an entry field. This date is captured from the **ZCMO screen** and is displayed in ACTS to identify when a child is disenrolled from a CMO.

60e. CSPI Score: This field must be completed for children who have a Rehabilitation Service Begin Date. This is the total raw score that is the sum of all item ratings on the Childhood Severity of Psychiatric Illness (CSPI) rating scale. The valid entries are 0-81.

60f. Complexity Indicator: This field must be completed for children who have a Rehabilitation Service Begin Date. This is derived by counting the items on which the child received a rating of 2 or 3 on the CSPI rating scale. The valid entries are 0-27.

Note: CSPI Score and Complexity are to be updated whenever a new CSPI rating sheet is completed to monitor the child's needs and the effectiveness of treatment provided.

60g. Level of Care: Leave this field blank.

Sections D and E consist of information required by the federal Adoption and Foster Care Analysis and Reporting System (AFCARS). Non-identifying information collected in these sections, and elsewhere in the automated system, will be reported to the federal government. Missing data and /or late updating may result in loss of title IV-E federal funds.

#### SECTION D - AFCARS ALTERNATIVE CARE DETAILS

Section D must be completed for all children in Legal Status 1, 2, 3, or 4. This section must be completed when a child enters or re-enters out-of-home care, not when the child moves between placements.

Note: Fields 69-73, Evaluated Disability Conditions, should be coded "4" if the child has not yet been evaluated by a professional and these should be updated when a professional evaluation(s) is completed.

Fields 61-67 apply to the caretaker(s) present in the home at the time of the child's removal from the home.

\*61. Family Structure At Removal: Enter the code which best represents the caretaker(s) present in the household from which the child was removed for placement into out-of-home care. Indicate the structure of the family as of the date of the child's removal. Codes 1 and 2 describe families where there are two adults in a relationship as a couple. If a caretaker is not living as part of a couple, use family structure Code 3 or 4. Code 5, "unable to determine" should be used only if the child has been abandoned or the caretakers are otherwise unknown.

\*62. Child Ever Adopted?: Enter the code to indicate whether this child has ever been legally adopted. "Unable to determine" should only be used if the child has been abandoned or the child's parent(s) are otherwise not available to provide the information. A "Yes" code indicates this child was adopted prior to the current out-of-home placement.

Note: Do not include stepparent adoptions.

\*63. Age at Adoption: If field 62 is yes, then field 63 must be answered. Enter the code which indicates the child's age in years, actual or estimated, at the time of the legalized adoption. If the actual age is unknown, estimate.

Year of Birth of Caretaker(s) Present in Home at Time of Removal, Estimate if Necessary:  
The purpose of these fields is to record the two digit year of birth of the caretakers from whom the child was removed. If the actual year of birth is unknown, it is appropriate to estimate.

Note: Fields 64-67 correspond with the family structure represented in field 61. If field 61 indicates the family structure to be a single person, then only one field from 64-67 may be entered. If field 61 indicates the family structure to be a couple, then two fields from 64-67 must be entered.

64. Mother: Enter the two digit year of birth of the child's biological or adoptive mother, if she was present in the home at the time of the child's removal. If the actual year of birth is unknown, estimate.

65. Father: Enter the two digit year of birth of the child's biological or adoptive father, if he was present in the home at the time of the child's removal. If the actual year of birth is unknown, estimate.

66. Other Principal Female Caretaker: Enter the two digit year of birth of the female caretaker, other than the biological or adoptive mother, if one was present in the home at the time of the child's removal. If the actual year of birth is unknown, estimate.

67. Other Principal Male Caretaker: Enter the two digit year of birth of the male caretaker, other than the biological or adoptive father, if one was present in the home at the time of the child's removal. If the actual age is unknown, estimate.

68. Leave this field blank.

\* Evaluated Disability Conditions: Under each field, enter a code to indicate the degree to which this condition is applicable to the child. This will be based upon clinical diagnosis



by a professional. Each field must be completed. If the child has not yet been evaluated by a medical or mental health professional, enter code 4, "not yet evaluated."

Use Code "0" to indicate that a professional has evaluated the child and determined the disability does not apply. Record documentation of the evaluation(s) in the case record.

\*69. Physical: A physical condition that adversely affects the child's day-to-day motor functioning, such as cerebral palsy, spina bifida, multiple sclerosis, orthopedic impairments, and other physical disabilities.

\*70. Emotionally Disturbed: A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree:

- an inability to build or maintain satisfactory interpersonal relationships;
- inappropriate types of behavior or feelings under normal circumstances;
- a general pervasive mood of unhappiness or depression; or,
- a tendency to develop physical symptoms or fears associated with personal problems.

This condition includes persons who are schizophrenic or autistic. This condition does not include persons who are socially maladjusted, unless it is determined that they are also seriously emotionally disturbed.

Note: Code 3 "severe" must be entered in field 70 for all children with a Career Parent placement type (CFP).

\*71. Mental Retardation: Significantly below average general cognitive and motor functioning along with developmental delays that adversely affect a child's socialization and learning.

\*72. Visual or Hearing: A visual impairment that may significantly affect educational performance or development; or a hearing impairment, whether permanent or fluctuating that adversely affects educational performance.

\*73. Other Special Care: Conditions other than those covered under fields 69-72 which require special medical care such as chronic illnesses. Children diagnosed as HIV positive or with AIDS should be included in this field.

Removal Conditions: Indicate each condition associated with the child's removal and placement into out of home care by placing an "X" in the appropriate fields. More than one condition may apply. These conditions apply to the child's current or most recent removal from home. These conditions do not apply to a child moving between out-of-home care placements while he/she is in the Division's custody. The turnaround form will display a "y" for the applicable removal conditions. If a removal condition is indicated in error, enter an "N" in the gray area of the form. The Data Entry Operator will then delete that removal condition.

Indicate one or more of the following Removal Conditions:

74. Child Disability: A clinically diagnosed disability was at least one of the factors which led to the child's removal. For example, the child has a clinically diagnosed

disability (as indicated in fields 69-73) AND this disability was a contributing factor which led to the child's removal from home.

75. Child Behavior Problem: The child's behavior in school and/or the community adversely affects socialization, learning, growth and moral development and was at least one of the factors which led to the child's removal from home. Examples include running away from home and gang behavior.
76. Abandonment: The child has been left alone or with others, and the caretaker did not return or make his whereabouts known.
77. Relinquishment: The parent(s), in writing, assigned the physical and legal custody of the child to the agency for the purpose of having the child adopted.
78. Inadequate Housing: Housing facilities were substandard, overcrowded, unsafe or otherwise inadequate so that the parent(s) and child could not reside together. This condition includes homelessness.
79. Physical Abuse: Alleged or probable cause finding of physical abuse, injury or maltreatment of the child by a person responsible for the child's welfare. This includes the death of a sibling if the concern is that this child has been or may be physically abused.
80. Sexual Abuse: An allegation or probable cause finding of sexual abuse or exploitation of a child by a person who is responsible for the child's welfare was at least one of the removal conditions.
81. Neglect: An allegation or probable cause finding of negligent treatment or maltreatment, including failure to provide adequate food, clothing, shelter or care, was at least one of the removal conditions. This field includes emotional abuse. This includes the death of a sibling if the concern is that this child has been or may be neglected.
82. Child Alcohol Abuse: The child's compulsive use of or need for alcohol was a factor which led to the child's removal. Include infants addicted to alcohol at birth.
83. Parent Alcohol Abuse: The parent or principal caretaker's compulsive use of alcohol was a factor which led to the child's removal.
84. Child Drug Abuse: The child's compulsive use of or need for narcotics was a factor which led to the child's removal. Include infants addicted to narcotics at birth.
85. Parent Drug Abuse: The parent or caretaker's compulsive use of drugs was a factor which led to the child's removal.

Note: Fields 82-85 address drug/alcohol addictions.

86. Parent Incarceration: The temporary or permanent placement of a parent or caretaker in jail/prison was a factor in the child's removal from home.

87. Parent Illness/Condition: A physical or emotional illness or disabling condition adversely affecting the caretaker's ability to care for the child.
88. Parent Death: Family stress or inability to care for the child due to the death of a parent or caretaker was a factor in the child's removal.

#### SECTION E - AFCARS ADOPTION DETAILS

Section E must be completed by the time a child's adoption is finalized.

- \*89. Placed From? (MO, Other State, Other Country): Enter the code which indicates the location of the individual or agency that had custody or responsibility for the child at the time of initiation of adoption proceedings.
- 1 - Missouri: An individual or agency in Missouri had custody of the child at the time adoption proceedings were initiated.
  - 2 - Another state: An individual or agency in another state or U.S. territory had responsibility for the child at the time adoption proceedings were initiated.
  - 3 - Another country: Immediately prior to the adoptive placement, the child was residing in another country and was not a citizen of the U.S.
- \* 90. Individual or Agency Which Placed Child For Adoption: Indicate the individual or agency which placed the child for adoption.
- 1 - State of Missouri: CD or another state agency.
  - 2 - Private Agency: A for-profit or non-profit agency institution placed the child for adoption.
  - 3 - Tribal Agency: A unit within one of the federally recognized Indian tribes or Indian tribal organizations placed the child for adoption.
  - 4 - Independent Person: A doctor, lawyer, or other individual placed the child for adoption.
  - 5 - DYS – Missouri
  - 6 - DMH – Missouri
91. Birth/Last Legal Mother Year of Birth: Enter the two digit year of birth for the child's birth mother. If the child is being adopted for the second (or more) time, enter the year of birth for the previous adoptive mother. If the actual year of birth is unknown, estimate.
92. Birth/Last Legal Father Year of Birth: Enter the two digit year of birth for the child's birth father. If the child is being adopted for the second (or more) time, enter the year of birth for the previous adoptive father. If the actual year of birth is unknown, estimate.

- \*93. Birth mother married at Time of Child's Birth?: Indicate whether the birth mother was married at the time of the child's birth. Do not use "unable to determine" unless the child was abandoned and no information is available on the mother.
- \*94. Adoptive parent relationship: Indicate the adoptive parent's prior relationship with the child.
- 1 - Stepparent: The adoptive parent was the spouse of the child's birth parent, but the birth parents' rights were terminated or the birth parents are deceased.
  - 2 - Other relative by blood or marriage: The adoptive parent was a relative, other than stepparent, through the birth parents by blood or marriage.
  - 3 - Non-relative foster home: The child was placed in a non-relative foster family home with a family which later adopted him or her.
  - 4 - Other: The adoptive parent's prior relationship to the child fits into none of the above categories.
- \*95. Primary Special Need: Indicate the primary basis for categorization as special needs for the purpose of determining eligibility for adoption subsidy under Title IV-E. Refer to Alternative Care Handbook Procedure D-16, attachment E.

Note: If more than one option applies, indicate the one which would make it most difficult to place the child for adoption.

Note: Code 0 "Not applicable" indicates the child does not have special needs.

Medical Special Needs: If field 95 is answered as "medical conditions," indicate the type of medical condition(s) in fields 96-100. The turnaround form will display a "Y" for the applicable medical special needs. If a medical special need is indicated in error, enter an "N" in the gray area of the form. The data entry operator will then delete that removal condition.

Note: Fields 69-73 indicate whether a foster child has been diagnosed as having a disability condition and if so, to what degree. Fields 96-100 should be marked for an adoptive child only if the child qualifies as a special needs child primarily due to his medical condition as indicated in field 95.

96. Physical: A physical condition that adversely affects the child's day-to-day motor functioning, such as cerebral palsy, spina bifida, multiple sclerosis, orthopedic impairments, and other physical disabilities.
97. Emotionally Disturbed: A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree:
- an inability to build or maintain satisfactory interpersonal relationships;
  - inappropriate types of behavior or feelings under normal circumstances;
  - a general pervasive mood of unhappiness or depression; or,

- a tendency to develop physical symptoms or fears associated with personal problems.

The term includes persons who are schizophrenic or autistic. The term does not include persons who are socially maladjusted, unless it is determined that they are also seriously emotionally disturbed.

98. Mental Retardation: Significantly below average general cognitive and motor functioning along with developmental delays that adversely affect a child's socialization and learning.
99. Visual or Hearing: A visual impairment that may significantly affect educational performance or development; or a hearing impairment, whether permanent or fluctuating that adversely affects educational performance.
100. Other Special Care: Conditions other than those covered under fields 96-99 which require special medical care such as chronic illnesses. Children diagnosed as HIV positive or with AIDS should be included in this field.

#### SECTION F - CASE CLOSING INFORMATION:

Fields 101 and 102 are a block. When one field is completed, the other field must also be completed.

101. Close Date: Enter the date the case is closed for services as an alternative care case. For children returning to their parent's home, the close date will be the date the child is placed with their parent. The close date for a CYAC child will be the date the CYAC parent left Alternative Care.

**NOTE:** The SS-61 should remain open for a child who has gone home for a trial home visit, prior to the court relieving CD of custody. The SS-61 should remain open even though the parents have been approved for TANF (formerly AFDC) for the child. In this case, the placement subtype "trial home visit" should be entered. After CD has been relieved of custody, or if the trial visit exceeds 180 days, the SS-61 can then be closed. Refer to the CWM Section 4.10.11, for additional information about trial visits.

Prior to closing, all update information should be entered. The legal status must be updated to reflect the legal status of the child at the time of closing (i.e., legal status 1, 3, 4, 5, 6 or 7). A Title XIX end date (Field 58) must be reported prior to closing when an entry has previously been reported in Field 57 (Title XIX Begin Date).

**NOTE:** An adoption subsidy child whose adoption is finalized will remain open in ACTS until the adoption subsidy is terminated.

UPDATE AND CLOSING INFORMATION CAN BE REPORTED ON THE SAME FORM USING ACTION CODE C/D.

If a case has been closed and update information was inadvertently omitted, send an IOC to your circuit payment specialist or CSPU explaining the situation with a copy of the SS-61 form. The omitted information will then be entered in the system at the Central Office level.

NOTE: It is important that timely closing of cases occur as:

Late closing could cause an overpayment to a vendor.

Late closing will delay the addition of a child to an AFDC case which will delay Medicaid coverage.

Late closing will affect AFCARS reporting and may result in loss of title IV-E federal funds.

\*102. Close Reason: Enter the code to denote the reason for case closing. For a CYAC child, the close reason 10 (CYAC child) must be entered.

\*102a. DMH Close Date: Enter the date that the child exited services provided by the Department of Mental Health.

#### SECTION G - WORKER INFORMATION:

\*103. Case Manager Number: Enter the Worker I. D. Number of the case manager for the child. This is a five digit number.

NOTE: If a child is being transferred from CD custody to care and custody with the Juvenile Court, the Worker I.D. Number should be deleted by entering an asterisk (\*).

103a. Case Manager Begin Date: Upon case opening, this field automatically populates the correct date. For updates, whenever field 103 (Case Manager) is changed or updated, the date the case manager changed must be updated in field 103a.

104. Caseload Number: Enter the caseload number of the worker (Case manager or Service Worker) who is providing direct services to the child. This field is optional, but may be required by a county office. This is a five digit number. Refer to local procedures regarding the use of this field.

NOTE: Information in this field can be deleted by entering an asterisk (\*) in the gray area.

105. Service Worker Number: Enter the Worker I.D. Number of the service worker. If the child is in the case manager county, the case manager's Worker I.D. Number would need to be entered here as the Case Manager is also the service worker. If the child is placed outside the case manager county, the Worker I.D. Number of the service worker (child's worker) in the other county must be entered. This is a five digit number.

NOTE: If a child is being transferred from CD custody to care and custody with the Juvenile Court, the Service Worker Number should be deleted by entering an asterisk (\*).

105a. Service Worker Begin Date: Upon case opening, this field automatically populates the correct date. For updates, whenever field 105 (Service Worker) is changed or updated, the date the service worker changed must be updated in field 105a.

Signature: The worker completing the form should sign their name on the signature line.

Date Form Completed: Enter the date the form is completed. When more than one form for the same child is submitted, the worker must number the forms in order of desired entry so the data entry operator enters the information in the correct order.

#### INSTRUCTIONS FOR RETENTION:

A 30 day revolving file should be maintained in the county office for all data entered forms (original). After 30 days, the original SS-61 form that was data entered can be destroyed.

The copy should be maintained in the client case file until the turnaround form is received from Central Office.

MEMORANDA HISTORY: CS87-104, CS87-126, CS89-77, CS89-67, CS91-5, CS91-9, CS91-66, CS91-6, CS92-13, CS92-19, CS92-38, CS92-59, CS93-18, CS93-23, CS93-41, CS93-54, CS94-6, CS95-39, CS95-45, CS95-69, CS97-13, CS97-34, CS97-46, CS98-54, [CD05-05](#), [CD05-80](#), [CD06-52](#)